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Abstract 199

TITLE: A Process for Enhancing the Capacity of communities to Implement and sustain Interventions: The Community Intervention Trial for Youth (CITY)

AUTHORS: Kim, B.; Guenther-Grey, C. (Centers for Disease Control and Prevention, Atlanta, GA); Miller, R. (University of Illinois at Chicago); and the CITY Projects Team

ISSUE: Studies have shown that capacity building can help communities and organizations sustain effective HIV prevention programs. The CITY Project is a national, multi-site study that will evaluate the effectiveness of a community-level intervention in reducing HIV-risk behaviors among young men who have sex with men (YMSM). The project intends to enhance the capacity of local communities to implement intervention activities for YMSM after the study period. Capacity and sustainability are important because when federal funding for the study ends, local programs will need other resources to sustain the intervention.

SETTING: The CITY Project includes 13 communities across the U. S.; interventions are being implemented in seven of these. From the beginning of the project, local research teams have recruited community-based organizations (CBO), youth steering committees, community advisory boards and other partners to collaborate in developing and implementing the interventions.

PROJECT: The CITY Project is taking several steps to enhance the capacity of the CBOs and other partners to 1 implement and sustain the components of the CITY intervention (peer health educator network, social marketing, social events, and skill-building through small group activities). First, research staff met with current or prospective partners to discuss their interest in implementing one or more of the intervention components and their ability to do so. Through these discussions and review of CBO partner documents, the research teams determined the capacity of partners in 12 topic areas, 5 of which will be the central focus of capacity-building efforts: 1) grant writing and obtaining resources to sustain programs, 2) process and outcome evaluation of programs, 3) cultural competency in working with the targeted ethnic population of YMSM, 4) adolescent development and sexuality among YMSM, and 5) program development and-management. Depending on the level of partner interest or need for additional capacity-building in these areas, the research teams will assist CBO partners in contacting other technical assistance providers (using a resource inventory developed by the CITY project), or will provide direct assistance to the CBO.

RESULTS: CBO partners in the various communities are at different levels of capacity. CBOs vary in terms of their size and budget for prevention activities, the kinds of programs they do, and their experience with programs for YMSM. Local CBOs want to collaborate in implementing the intervention and many expressed interest in enhancing their capacity, particularly in terms of obtaining resources.

LESSONS LEARNED: Collaborating with community partners from the start of an intervention and working with them to build capacity could increase the chances that the communities sustain the CITY project and other HIV prevention interventions.

PRESENTER CONTACT INFORMATION

Name: Bryan Kim

Address: Centers for Disease Control and Prevention

1600 Clifton Rd. NE MS E-37

Atlanta, GA 30333

Telephone: (404) 639-1913

Fax: (404) 639-1950 **E-mail**: bdk9@cdc.gov